

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

FRIENDS OF ALEXANDRA

ADDRESS (number and street)

PO BOX 18071

Check if different
than previously
reported. (ACC)

CHICAGO

IL

60618

2. FEC IDENTIFICATION NUMBER ▼

C

C00540609

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

IL

04

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y

07 / 01 / 2013

through

M M / D D / Y Y Y Y

09 / 30 / 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Marian Mangoubi

Signature of Treasurer

Marian Mangoubi

[Electronically Filed]

Date

M M / D D / Y Y Y Y

01 / 31 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

FRIENDS OF ALEXANDRA

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	3

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	13040.33	36241.61
(b) Total Contribution Refunds (from Line 20(d))	200.00	500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	12840.33	35741.61
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	11138.19	34075.46
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	11138.19	34075.46
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1666.15	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

FRIENDS OF ALEXANDRA

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	3

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

10450.00

21511.00

(ii) Unitemized.....

2043.00

12468.50

(iii) TOTAL of contributions from individuals ▶

12493.00

33979.50

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

250.00

250.00

(d) The Candidate.....

297.33

2012.11

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

13040.33

36241.61

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

13040.33

36241.61

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 15

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	11138.19	34075.46
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	200.00	500.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	200.00	500.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	11138.19	34575.46

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	-35.99
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	13040.33
25. SUBTOTAL (add Line 23 and Line 24).....	13004.34
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	11338.19
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1666.15

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
FRIENDS OF ALEXANDRA

A. Full Name (Last, First, Middle Initial) Jamie (Weiss) Feldman			Date of Receipt M M / D D / Y Y Y Y 08 / 22 / 2013	
Mailing Address 1615 N. Wolcott #203			Transaction ID : SA11AI.4837	
City	State	Zip Code	Amount of Each Receipt this Period 2600.00	
Chicago	IL	60622	In-kind - Items for a fundraiser	
FEC ID number of contributing federal political committee.		C		
Name of Employer		Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		
B. Full Name (Last, First, Middle Initial) Mason Cole			Date of Receipt M M / D D / Y Y Y Y 07 / 25 / 2013	
Mailing Address 1197 Bienveneda Ave.			Transaction ID : SA11AI.4831	
City	State	Zip Code	Amount of Each Receipt this Period 2000.00	
Pacific Palisades	CA	90272	In-kind - Legal Services provided 7/22/13 - 7/25/13	
FEC ID number of contributing federal political committee.		C		
Name of Employer		Occupation		
Cole Sadkin, LLC		Lawyer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2100.00		
C. Full Name (Last, First, Middle Initial) Andrew Feldman			Date of Receipt M M / D D / Y Y Y Y 08 / 22 / 2013	
Mailing Address 1615 N. Wolcott #203			Transaction ID : SA11AI.4835	
City	State	Zip Code	Amount of Each Receipt this Period 2500.00	
chicago	IL	60622	In-kind - Items for a fundraiser	
FEC ID number of contributing federal political committee.		C		
Name of Employer		Occupation		
AJ Feldman Financial		Financial Planner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		
SUBTOTAL of Receipts This Page (optional).....			7100.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 15

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

FRIENDS OF ALEXANDRA

Full Name (Last, First, Middle Initial)

A. Maribeth Kuzmeski

Mailing Address 1001 Potomac Court

City

Grayslake

State

IL

Zip Code

60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Red Zone MarketingOccupation
Consultant

Receipt For:

☐ Primary
☐ Other (specify)

General

P(2014)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		21		2013

Transaction ID : SA11AI.4787

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Polly Reese

Mailing Address 4431 N. Maplewood

City

Chicago

State

IL

Zip Code

60625

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self EmployedOccupation
Dentist

Receipt For:

☐ Primary
☐ Other (specify)

General

P(2014)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		14		2013

Transaction ID : SA11AI.4777

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Jared Silver

Mailing Address 28576 West Lindbergh Dr.

City

Barrington

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
At-a-Glance

Occupation

Receipt For: 2014

☒ Primary
☐ Other (specify)

General

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		26		2013

Transaction ID : SA11AI.4833

Amount of Each Receipt this Period

2600.00

In-kind - Video Services - Why I'm Running

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3350.00

10450.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 15

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
FRIENDS OF ALEXANDRA

A. Full Name (Last, First, Middle Initial) Friends of Debbie Halvorson		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>27</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	09		27		2013	
M M	/	D D	/	Y Y Y Y										
09		27		2013										
Mailing Address 3511 Union Ave		Transaction ID : SA11C.4828												
City Steger	State IL	Zip Code 60475	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> <td>250.00</td> </tr> </table>											250.00
										250.00				
FEC ID number of contributing federal political committee. <div>C</div>														
Name of Employer		Occupation												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) P(2014)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="10"></td> <td>250.00</td> </tr> </table>												250.00
										250.00				
B. Full Name (Last, First, Middle Initial)		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M	/	D D	/	Y Y Y Y						
M M	/	D D	/	Y Y Y Y										
Mailing Address														
City	State	Zip Code	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> </tr> </table>											
FEC ID number of contributing federal political committee. <div>C</div>														
Name of Employer		Occupation												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="10"></td> </tr> </table>												
C. Full Name (Last, First, Middle Initial)		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M	/	D D	/	Y Y Y Y						
M M	/	D D	/	Y Y Y Y										
Mailing Address														
City	State	Zip Code	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> </tr> </table>											
FEC ID number of contributing federal political committee. <div>C</div>														
Name of Employer		Occupation												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="10"></td> </tr> </table>												
SUBTOTAL of Receipts This Page (optional).....		<table border="1"> <tr> <td colspan="10"></td> <td>250.00</td> </tr> </table>												250.00
										250.00				
TOTAL This Period (last page this line number only).....		<table border="1"> <tr> <td colspan="10"></td> <td>250.00</td> </tr> </table>												250.00
										250.00				

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 15

☐ 11a ☐ 11b ☐ 11c ☒ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF ALEXANDRA

A. Full Name (Last, First, Middle Initial) Alexandra C. Eidenberg		Date of Receipt M M / D D / Y Y Y Y 07 / 11 / 2013	
Mailing Address 3419 W. Irving Park Rd.		Transaction ID : SA11D.4818	
City Chicago	State IL	Zip Code 60618	Amount of Each Receipt this Period 241.65
FEC ID number of contributing federal political committee. C H4IL04083		Name of Employer The Insurance People	
Occupation Owner		Election Cycle-to-Date 1956.43	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) P(2014)		Amount of Each Receipt this Period 27.84 In-kind - Food for Volunteers	
B. Full Name (Last, First, Middle Initial) Alexandra C. Eidenberg		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2013	
Mailing Address 3419 W. Irving Park Rd.		Transaction ID : SA11D.4938	
City Chicago	State IL	Zip Code 60618	Amount of Each Receipt this Period 1984.27
FEC ID number of contributing federal political committee. C H4IL04083		Name of Employer The Insurance People	
Occupation Owner		Election Cycle-to-Date 1984.27	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Amount of Each Receipt this Period 27.84 In-kind - Food for Volunteers	
C. Full Name (Last, First, Middle Initial) Alexandra C. Eidenberg		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2013	
Mailing Address 3419 W. Irving Park Rd.		Transaction ID : SA11D.4940	
City Chicago	State IL	Zip Code 60618	Amount of Each Receipt this Period 27.84 In-kind - Food for Volunteers
FEC ID number of contributing federal political committee. C H4IL04083		Name of Employer The Insurance People	
Occupation Owner		Election Cycle-to-Date 2012.11	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Amount of Each Receipt this Period 297.33	
SUBTOTAL of Receipts This Page (optional).....		297.33	
TOTAL This Period (last page this line number only).....		297.33	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 15

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF ALEXANDRA

Full Name (Last, First, Middle Initial)

A. Jamie (Weiss) FeldmanMailing Address 1615 N. Wolcott
#203

City Chicago State IL Zip Code 60622

Purpose of Disbursement
In-kind - Items for a fundraiser

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	22	2013

Amount of Each Disbursement this Period

2600.00

Transaction ID : SB17.4838

B. ActBlue

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Processing Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	07	2013

Amount of Each Disbursement this Period

9.88

Transaction ID : SB17.4839

c. ActBlue

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Processing Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	14	2013

Amount of Each Disbursement this Period

5.93

Transaction ID : SB17.4840

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2615.81

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 15

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF ALEXANDRA

Full Name (Last, First, Middle Initial)

A. ActBlue

Mailing Address 366 Summer Street

City	State	Zip Code
Somerville	MA	02144

Purpose of Disbursement
Processing Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		18		2013

Amount of Each Disbursement this Period

10.68

Transaction ID : SB17.4844

B. ActBlue

Mailing Address 366 Summer Street

City	State	Zip Code
Somerville	MA	02144

Purpose of Disbursement
Processing Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		25		2013

Amount of Each Disbursement this Period

17.78

Transaction ID : SB17.4845

C. ActBlue

Mailing Address 366 Summer Street

City	State	Zip Code
Somerville	MA	02144

Purpose of Disbursement
Processing Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		02		2013

Amount of Each Disbursement this Period

1.98

Transaction ID : SB17.4846

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

30.44

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 15

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF ALEXANDRA

Full Name (Last, First, Middle Initial)

A. ActBlue

Mailing Address 366 Summer Street

City	State	Zip Code
Somerville	MA	02144

Purpose of Disbursement
Processing Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		08		2013

Amount of Each Disbursement this Period

1.98

Transaction ID : SB17.4847

B. ActBlue

Mailing Address 366 Summer Street

City	State	Zip Code
Somerville	MA	02144

Purpose of Disbursement
Processing Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2013

Amount of Each Disbursement this Period

5.66

Transaction ID : SB17.4848

C. ActBlue

Mailing Address 366 Summer Street

City	State	Zip Code
Somerville	MA	02144

Purpose of Disbursement
Processing Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		22		2013

Amount of Each Disbursement this Period

1.98

Transaction ID : SB17.4849

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

9.62

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 15

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF ALEXANDRA

Full Name (Last, First, Middle Initial)

A. ActBlue

Mailing Address 366 Summer Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		30		2013

City	State	Zip Code
Somerville	MA	02144

Amount of Each Disbursement this Period

10.28

Purpose of Disbursement
Processing FeeCategory/
Type**Transaction ID : SB17.4850**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. Mason Cole

Mailing Address 1197 Bienvenida Ave.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		25		2013

City	State	Zip Code
Pacific Palisades	CA	90272

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
In-kind - Legal Services provided 7/22/13 - 7/25/13Category/
Type**Transaction ID : SB17.4832**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. Alexandra C. Eidenberg

Mailing Address 3419 W. Irving Park Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		21		2013

City	State	Zip Code
Chicago	IL	60618

Amount of Each Disbursement this Period

27.84

Purpose of Disbursement
In-kind - Food for VolunteersCategory/
Type**Transaction ID : SB17.4939**

Candidate Name

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: IL

District: 04

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2038.12

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 15

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF ALEXANDRA

Full Name (Last, First, Middle Initial)

A. Alexandra C. Eidenberg

Mailing Address 3419 W. Irving Park Rd.

City	State	Zip Code
Chicago	IL	60618

Purpose of Disbursement
In-kind - Food for Volunteers

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	--

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

State: IL District: 04

Date of Disbursement

M M / D D / Y Y Y Y
09 / 28 / 2013

Amount of Each Disbursement this Period

27.84

Transaction ID : SB17.4941

B. Andrew FeldmanMailing Address 1615 N. Wolcott
#203

City	State	Zip Code
chicago	IL	60622

Purpose of Disbursement
In-kind - Items for a fundraiser

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	---

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 22 / 2013

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.4836

C. NGP VANMailing Address 1101 15th Street, NW
Ste 500

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement
Software Licensing - Compliance

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
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Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 02 / 2013

Amount of Each Disbursement this Period

670.00

Transaction ID : SB17.4854

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3197.84

